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## **COVER LETTER**

	SA LLC				
GI:	Name of Lim	ited Liability Company	<del></del>		
losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
eturn all correspo	ndence concerning this matter	to the following:			
	ROXANA DIAZ				
		Name of Person			
	CORPAG REGISTERED	AGENTS (USA), INC.			
		Firm/Company	<del> </del>		
	999 BRICKELL AVE STE	≟ 820			
	<u> </u>	Address	<del> </del>		
	MIAMI, FL 33131				
		City/State and Zip Code	<del></del>		
ner information c			omeanon)		
NA DIAZ		305 358-7872			
Name o	f Person		ime Telephone Number		
d is a check for th	ne following amount:				
.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Street Address: Registration S	Section		
Division of C	Corporations	Division of C	orporations		
P.O. Box 6327			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	Division of Cor  FAMBA US  FAMBA US	Name of Limitosed Articles of Amendment and fee(s) are substant all correspondence concerning this matter  ROXANA DIAZ  CORPAG REGISTERED  999 BRICKELL AVE STI  MIAMI, FL 33131  ROXANADIAZ@CORPATE-mail address: (ner information concerning this matter, please of the place of Person  d is a check for the following amount:  100 Filing Fee Solution Solution Section  Division of Corporations	PAMBA USA LLC    FAMBA USA LLC		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2521 JUN 24 AM 6: 52

FAMBA USA LLC

(Name of the Limited Liability Company as it now appears of our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/29/2021 and assigned Florida document number 1.21000200498

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address 4 AH 6: 52	Type of Action	
MGR	Ivonne Fontannaz	Puerto Madero 9710 Pudahuel, Santiago, Chile.	<b>=</b> Add	
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amending any other information, enter change(s) here:		JUI: 24		
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ffective date, if other than the date of filing:		(n	ptional	n
an effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicab ocument's effective date on the Department of State's records.		han 90 days	after filin	g.) Pursuant to 605.0207
record specifies a delayed effective date, but not an effective time	e, at 12:01 a.m. on t	he earlier o	ť: (b) T	The 90th day after the
is filed.				
D with				
ated Sune 14th . 2001	. •			
-///				
Signature of a member or authorize	zed representative of a	member		<del></del>
ENRIQUE TRAVIESO				
	nama afaire			
Typed or printed	name of signee			

Filing Fee: \$25.00